

MAR 04 2008

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

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Effective on 12/09/2004.
Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2008☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) **-180.00-****Complete if Known**

Application Number	10/537,905
Filing Date	05/30/2006
First Named Inventor	Torsten WAHLER
Examiner Name	Roger L. PANG
Art Unit	3681
Attorney Docket No.	2002P16790WOUS

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 502464 Deposit Account Name: Siemens Schweiz AG

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): -\$180.00- for submission of IDS (37 CFR 1.97 and 1.17(p))-180.00-**SUBMITTED BY**

Signature

Name (Print/Type)

John P. Musone

Registration No.
(Attorney/Agent)

44,961

Telephone 407 736 6449

Date March 4, 2008

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FACSIMILE COVER SHEET

In the UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor: Torsten WAHLER

Application No. 10/537,905

Attorney Docket No. 2002P16790WOUS

Filed: 05/30/2006

Title: GEARING

Examiner: Roger L. PANG

Art Unit: 3681

FACSIMILE ATTN TO EXAMINER: Roger L. PANG

FAX NO.: 571-273-8300

AMENDMENT

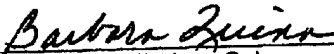
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Siemens Corporation

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MAR 04 2008

PTO/SB/21 (10-07)


Approved for use through 10/31/2007. OMB 0661-0031

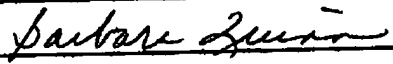
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/537,905
	Filing Date	05/30/2008
	First Named Inventor	Torsten WAHLER
	Art Unit	3881
	Examiner Name	Roger L. PANG
	Attorney Docket Number	2002P16790WOUS
Total Number of Pages in This Submission		11

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	SIEMENS	
Signature		
Printed name	John P. Musone	
Date	March 4, 2008	Reg. No. 44,961

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Signature		
Typed or printed name	Barbara Quinn	Date March 4, 2008

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